FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
OPM LIMITED OFFERING EXEMPT

	1441	981			
i	OMB API	PROVAL			
	OMB Number: 3235-0				
	Expires:				
	Estimated aver	rage burden			

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
	1				

hours per response. 16.00

UNIFORM LIMITED OFFERING EXEM	PTION						
Name of Offering (check if this is an amendment and name has changed, and indicate change.)							
The Rodgers Family Partnership, L.P.							
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	☐ ULOE						
Type of Filing: New Filing Amendment							
A. BASIC IDENTIFICATION DATA	1910/14 1201/1604 1201/1604 1805 1805 1805 1806 1806						
1. Enter the information requested about the issuer							
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08056837						
The Rodgers Family Partnership, L.P.	0809091						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
10086 Danns Way, Streetsboro, OH 44241	(330) 417-1793						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)						
Brief Description of Business	2						
Private investment partnership	\mathcal{D}						
	DDOCECCE						
Type of Business Organization corporation limited partnership, already formed other (p	PROCESSED						
business trust limited partnership, to be formed	AUG 062008						
Month Year	<u> </u>						
Actual or Estimated Date of Incorporation or Organization: OI7 OI8 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)							
GENERAL INSTRUCTIONS							
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.						
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.							
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.						
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be						
Information Required: A new filing must contain all information requested. Amendments need only repo thereto, the information requested in Part C, and any material changes from the information previously suppl not be filed with the SEC.	rt the name of the issuer and offering, any changes lied in Parts A and B. Part E and the Appendix need						
Filing Fee: There is no federal filing fee.							
State:							
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for S ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall						
ATTENTION							

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

		А. В	ASIC IDEN	NTIF	ICATION DATA				
2. Enter the information re-	quested for the fol	lowing:							
• Each promoter of the issuer, if the issuer has been organized within the past five years;									
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer									
Each executive offi	cer and director of	corporate issu	ers and of co	orpor	ate general and man	aging	partners of	partne	rship issuers; and
• Each general and m	nanaging partner o	f partnership is	suers.						
Check Box(es) that Apply:	Promoter	Benefici	al Owner		Executive Officer		Director	Ø	General and/or Managing Partner
Full Name (Last name first, if JR Investment Manageme	•								
Business or Residence Address (Number and Street, City, State, Zip Code) 10086 Danns Way, Streetsboro, OH 44241									
Check Box(es) that Apply:	Promoter	Benefici	al Owner		Executive Officer		Director	Ø	General and/or Managing Partner
Full Name (Last name first, if Jason Rodgers	findividual)								
Business or Residence Address	ss (Number and	Street, City, St.	ate, Zip Cod	e)					
10086 Danns Way, Streets	sboro, OH 4424	1							
Check Box(es) that Apply:	Promoter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	(individual)								
Business or Residence Addres	ss (Number and	Street, City, Sta	ate, Zip Cod	e)					
Check Box(es) that Apply:	Promoter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Business or Residence Addres	ss (Number and	Street, City, Sta	ate, Zip Cod	e)					
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Business or Residence Addres	ss (Number and	Street, City, Str	ate, Zip Cod	c)				· -	
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)					•			
Business or Residence Addres	ss (Number and	Street, City, Sta	ate, Zip Cod	c)					
Check Box(es) that Apply:	Promoter	Beneficia	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)									
Business or Residence Addres	s (Number and	Street, City, Sta	ate, Zip Cod	c)					
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)									

B. INFORMATION ABOUT OFFERING													
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No ⊠			
	Answer also in Appendix, Column 2, if filing under ULOE.												
2.	2. What is the minimum investment that will be accepted from any individual?								\$_50,000.00				
3.									Yes	No			
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful N/		Last name	first, if ind	ividual)									
		Residence	Address (N	lumber and	d Street, C	ity, State, 2	Lip Code)						
Nai	me of As	sociated Bi	roker or De	aler									
Sta	tes in WI	nich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							☐ All States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	Il Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nai	me of As	sociated Br	roker or De	aler									
Sta	tes in W	nich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	***************************************			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•••••	All States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if indi	ividual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								□ AI	l States				
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI								HI MS OR WY	MO PA PR			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity	.	\$
	Common Preferred	b 0.00	0.00
	Convertible Securities (including warrants)	5	a 165 000 00
	Partnership Interests		\$ 0.00
	Other (Specify)	. 100 000 000 0	
	Total		\$_100,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		<u>\$_165,000.00</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	T	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		s 0.00

	and total expenses furnished in response to Part C	ffering price given in response to Part C — Question — Question 4.a. This difference is the "adjusted ground process."	SS	\$						
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted growart C — Question 4.b above.	d							
			Payments to Officers, Directors, & Affiliates	Payments to Others						
	Salaries and fees		. 🔲 💲 0.00	\$ 0.00						
	Purchase of real estate	. 🔲 \$ <u>0.00</u>	ss							
	Purchase, rental or leasing and installation of rand equipment		_ 🗆 \$							
	Construction or leasing of plant buildings and	. 🗌 \$ <u>0.00</u>	\$ 0.00							
	Acquisition of other businesses (including the offering that may be used in exchange for the a issuer pursuant to a merger)	. [] \$ _0.00	s 0.00							
	- ·			\$ 0.00						
	Working capital			\$ 0.00						
	Other (specify): Estimated Management Fee	\$ 2,475.00	\$ 162,525.00							
	(1.5% annually); Performance Fee may also be charged but is not included in estimate									
	because of contingent nature of fee. Investn	. 🔲 \$								
	Column Totals									
	Total Payments Listed (column totals added)		. <u> </u>	65,000.00						
		D. FEDERAL SIGNATURE								
sig	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this noti furnish to the U.S. Securities and Exchange Comm accredited investor pursuant to paragraph (b)(2) of	ission, upon writte							
lss	uer (Print or Type)	Signature	Date							
Tł	ne Rodgers Family Partnership, L.P.		July 24, 2008							
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)	 							
Na	dya Marinin	Administrator for The Rodgers Family Partner	ership, L.P.							

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)